

Substitute for form 1449A/PTO
**INFORMATION DISCLOSURE
 STATEMENT BY APPLICANT**
 (Use as many sheets as necessary)

Complete if Known	
Application Number	Unknown 10/539765
Filing Date	Even Date Herewith
First Named Inventor	Grant, Michael
Group Art Unit	Unknown 1657
Examiner Name	Unknown Dr. Srivastava, K.C.

Sheet 1 of 1

Attorney Docket No: 1662.004US1

US PATENT DOCUMENTS

Examiner Initial *	USP Document Number	Publication Date	Name of Patentee or Applicant of cited Document	Filing Date If Appropriate
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Examiner Initials *	Foreign Document No	Publication Date	Name of Patentee or Applicant of cited Document	T ²
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OTHER DOCUMENTS -- NON PATENT LITERATURE DOCUMENTS

Examiner Initials *	Cite No ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
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EXAMINER

/Kailash Srivastava/

DATE CONSIDERED 07/18/2008